

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086446

FILED  
Apr 20, 2011  
Secretary of State

Entity Name: TCS SERVICES, INC.

**Current Principal Place of Business:**

8032 SHERWOOD CIRCLE  
LABELLE, FL 33935

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1710  
LABELLE, FL 33975

**New Mailing Address:**

FEI Number: 22-3937131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HUBBARD, LENICE  
8032 SHERWOOD CIRCLE  
LABELLE, FL 33935 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: HUBBARD, TONY R  
Address: P.O. BOX 247  
City-St-Zip: LABELLE, FL 33975

Title: VTD  
Name: HUBBARD, LENICE  
Address: PO BOX 247  
City-St-Zip: LABELLE, FL 33975

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LENICE HUBBARD

VTD

04/20/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date